09/19/2011 14:32

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FORM 3X

FE6AN026

REPORT OF RECEIPTS AND DISBURSEMENTS

•		For C	Other Than An	Authorize	ed Commit	tee		Office Use	Only	
1.	NAME OF COMMITTEE (in full)		FEC MAILING LAE YPE OR PRINT	_	xample:If typin ver the lines	g, type				
	Massachusetts Republican S	State Co	ongressional Comm	iittee						
		1 1	1 1 1 1 1					1 1 1 1		
AD	DRESS (number and street)	85	Merrimac St.							
	Check if different	Sui	ite 400					1 1 1 1	1 1 1 1	
L	than previously reported. (ACC)	Bos	ston				MA J	02	114 -	
2.	FEC IDENTIFICATION NUM	IBER	~	CITY 🛕			STATE	Z	IPCODE A	
	C00042622		:	3. IS THIS REPOR		NEW (N) OR	X	AMENDED (A)		
4.	TYPE OF REPORT (Choose One)	(b	Monthly Report Due On:	Feb 20 (M:	2) X	May 20 (M5)	A	ug 20 (M8)	Nov 20 (Non-Eli Year On	ily)
	(a) Quarterly Reports:			Mar 20 (M	3)	Jun 20 (M6)	S	ep 20 (M9)	Dec 20 (Non-Ele Year On	ection ly)
	April 15			Apr 20 (M	1)	Jul 20 (M7)	0	ct 20 (M10)	Jan 31	(YE)
	Quarterly Report(Q1) July 15	Q1) (c) 12-Day			Primary (12	P)	Genera	al (12G)	Runoff	(12R)
	Quarterly Report(C			RE-Election Convention (12C)		(12C)	Special (12G)			
	Quarterly Report(C January 31 Quarterly Report(Y		E	Election on					n the State of	
	July 31 Mid-Year Report(Non-election Year Only) (MY)		(d) 30-Day Post -Electi Report for the		General (30	G)	Runoff	(30R)	Special	(30S)
	Termination Repor (TER)	t	•	Election on					n the State of	
5.	Covering Period 0	4	01 201	1	through	0 4	30	2011		
	ertify that I have examined this be or Print Name of Treasurer		and to the best of n	ny knowledge	e and belief it is	s true, correct	and complet	e.		
. 16	or or rimeriamo or rioadaror									
Sig	nature of Treasurer Electro	nically l	Filed by Brent Ar	nderson		D	ate 0	6 15	2011	
NO	TE : Submission of false, erro	neous,	or incomplete inform	nation may s	subject the per	son signing thi	s Report to	the penalties o	of 2 U.S.C 437g	J .
	Office Use							1	FORM 3X . 12/2004)	

SUMMARY PAGE

OF RECEIPTS AND DISBURSEMENTS FEC Form 3X (Rev. 02/2003) Page 2 Write or Type Committee Name Massachusetts Republican State Congressional Committee D D [®]D 0 4 0 1 2011 0 4 3 0 2011 Report Covering the Period: From: To: **COLUMN A COLUMN B This Period** Calendar Year-to-Date (a) Cash on Hand 2011[°] 226459.16 January 1 (b) Cash on Hand at -123169.97 Begining of Reporting Period 31125.12 150751.65 (c) Total Receipts (from Line 19) (d) Subtotal (add lines 6(b) and 6(c) for Column A and Lines -92044.85 377210.81 6(a) and 6(c) for Column B) 48392.29 252197.95 Total Disbursements (from Line 31) Cash on Hand at Close of Reporting Period -140437.14 125012.86 (subtract Line 7 from Line 6(d)) 9. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) 10. Debts and Obligations owed the committee (Itemize all on 0.00 Schedule C and/or Schedule D) This Committee has qualified as a multicandidate committee. (see FEC FORM 1M) For further information contact:

Federal Election Commission 999 E street, NW Washington, DC 20463

> Toll Free 800-424-9530 Local 202-694-1100

DETAILED SUMMARY PAGE OF RECEIPTS

FEC Form 3X (Rev. 06/2004) Page 3

Write or Type Committee Name

Massachusetts Republican State Congressional Committee

м м 0 4 0 1 м°м 0 4 3 0 2011 2011 Report Covering the Period: From: **COLUMN A COLUMN B** I. Receipts **Total This Period** Calendar Year-to-Date 11. Contributions (other than loans) From: (a) Individuals/Persons Other Than Political Committees 14977.78 59424.52 (i) Itemized (use Schedule A) 16047.34 86147.13 (ii) Unitemized (iii) TOTAL (add 31025.12 145571.65 Lines 11(a)(i) and (ii) 0.00 0.00 (b) Political Party Committees Other Political Committees 100.00 5180.00 (such as PACs) Total Contributions (add Lines 11(a)(iii),(b) and (c)) (Carry 31125.12 150751.65 Totals to Line 33, page 5) 12. Transfers From Affiliated/Other 0.00 0.00 Party Committees 0.00 0.00 13. All Loans Received 0.00 0.00 14. Loan Repayments Received 15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) 0.00 0.00 (Carry Totals to Line 37, page 5) 16. Refunds of Contributions Made to Federal candidates and Other 0.00 0.00 Political Committees 17. Other Federal Receipts 0.00 0.00 (Dividends, Interest, etc.) 18. Transfers from Non-Federal and Levin Funds (a) Non-Federal Account 0.00 0.00 (from Schedule H3) 0.00 0.00 (b) Levin Funds (from Schedule H5) 0.00 0.00 (c) Total Transfer (add 18(a) and 18(b)). 19. Total Receipts (add Lines 11(d), 31125.12 150751.65 12, 13, 14, 15, 16, 17, and 18(c)) 20. Total Federal Receipts 31125.12 150751.65 (subtract Line 18(c) from Line 19)

FE6AN026

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)	of Disbursements	Page 4		
II. DISBURSEMENTS	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date		
Operating Expenditures: (a) Shared Federal/Non-Federal Activity (from Schedule H4)	0.00	0.00		
(i) Federal Share				
(ii) Non-Federal Share	0.00	0.00		
(b) Other Federal Operating Expenditures	48392.29	252197.95		
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii) and (b))	48392.29	252197.95		
Transfers to Affiliated/Other Party	0.00	0.00		
Committees Contributions to	0.00	0.00		
Federal Candidates/Committeesand Other Political Committees	0.00	0.00		
(use Schedule E)	0.00	0.00		
Coordinated Expenditures Made by Party Committees (2 U.S.C. 441a(d)) (use Schedule F)	0.00	0.00		
Loan Repayments Made	0.00	0.00		
Loans Made	0.00	0.00		
Refunds of Contributions To: (a) Individuals/Persons Other Than Political Committees	0.00	0.00		
(b) Political Party Committees	0.00	0.00		
(c) Other Political Committees (such as PACs)	0.00	0.00		
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c))	0.00	0.00		
Other Disbursements	0.00	0.00		
Federal Election Activity (2 U.S.C 431(20)) (a) Shared Federal Election Activity				
(from Schedule H6) (i) Federal Share	0.00	0.00		
(ii) "Levin" Share	0.00	0.00		
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00		
(c) Total Federal Election Activity (add Lines 30(a)(i), 30(a)(ii) and 30(b))	0.00	0.00		
. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c))	48392.29	252197.95		
. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii)				
from Line 31)	48392.29	252197.95		

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

	III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33.	Total Contributions (other than loans) from Line 11(d), page 3)	31125.12	150751.65
34.	Total Contribution Refunds (from Line 28(d))	0.00	0.00
35.	Net Contributions (other than loans) (subtract Line 34 from Line 33)	31125.12	150751.65
36.	Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b))	48392.29	252197.95
37.	Offsets to Operating Expenditures (from Line 15, page 3)	0.00	0.00
38.	Net Operating Expenditures (subtract Line 37 from Line 36)	48392.29	252197.95

FE6AN026

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 6 / 34 (check only one) X 11a 11b 11c 12 13 14 15 16 17
Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Massachusetts Republican State Cong	name and address of any political committee to	n for the purpose of soliciting contributions solicit contributions from such committee.
Full Name (Last, First, Middle Initial) THOMAS BARKER Mailing Address 437 MARLBOROUGH City BOSTON FEC ID number of contributing federal political committee. Name of Employer ATTORNEY Receipt For: Primary General Other (specify)	STREET, #11 State Zip Code MA 02115-1226 C Occupation FOLEY HOAG Aggregate Year-to-Date 400.00	Date of Receipt M M / D D / Y Y Y Y Y O 4 2 4 2 0 1 1 Transaction ID: SA11.185050 Amount of Each Receipt this Period 400.00 CONTRIBUTION
Full Name (Last, First, Middle Initial) HARVEY BINES Mailing Address 36 CLARKE ST City LEXINGTON FEC ID number of contributing federal political committee. Name of Employer SULLIVAN & WORCESTER Receipt For: Primary General Other (specify)	State Zip Code MA 02421-4916 C Occupation LAWYER Aggregate Year-to-Date 500.00	Date of Receipt M M / 29 / 2011 Transaction ID: SA11.185146 Amount of Each Receipt this Period 500.00 CONTRIBUTION
Full Name (Last, First, Middle Initial) EDGAR BRISTOL Mailing Address 28 UNION STREET City FOXBORO FEC ID number of contributing federal political committee. Name of Employer RETIRED Receipt For: Primary General Other (specify)	State Zip Code MA 02035-2316 C Occupation RETIRED Aggregate Year-to-Date 250.00	Date of Receipt M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
SUBTOTAL of Receipts This Page (optional)		1150.00

SCHEDULE A (FEC For ITEMIZED RECEIPTS	m 3X)	Use separate schedule(s) for each category of the Detailed Summary Page	(check only one) X 11a
Any information copied from such Re or for commercial purposes, other that	ports and Statements may in using the name and add	not be sold or used by any persoress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
NAME OF COMMITTEE (In Full) Massachusetts Republican S	State Congressional Co	ommittee	
Full Name (Last, First, Middle Initi SHAWN BURKE	al)		Date of Receipt
Mailing Address 65 TIBBITES	TOWN WAY		04 29 2011
City BOSTON	State MA	Zip Code 02129	Transaction ID: SA11.185128 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		150.00
Name of Employer CITY OF BOSTON	Occupation REP ELE	CTION COMMISSIONER	CONTRIBUTION
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 225.00	
Full Name (Last, First, Middle Initi GORDON CARR	al)		Date of Receipt
Mailing Address 23 HIGH ST.			04 28 2011
City HINGHAM	State MA	Zip Code 02043-3191	Transaction ID: SA11.185110 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C		150.00
Name of Employer GMC STRATEGIES	Occupation CONSUL		CONTRIBUTION
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 350.00	
Full Name (Last, First, Middle Initi HENRY CIBOROWSKI	al)		Date of Receipt
Mailing Address 135 MILLBU	RY ST.		0 4 1 9 2 0 1 1
City WORCESTER	State MA	Zip Code 01610-2821	Transaction ID: SA11.184931 Amount of Each Receipt this Period
FEC ID number of contributing federal political committee.	C	01010-2021	500.00
Name of Employer INFORMATION REQUESTED P BEST EFFORTS	ER Occupation INFORMA	ATION REQUESTED PER I	CONTRIBUTION BEST EFFORTS
Receipt For: Primary General Other (specify) ▼	Aggregate	Year-to-Date ▼ 500.00	
SUBTOTAL of Receipts This Page	(antional)		800.00

	SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 8 / 34 (check only one) X 11a 11b 11c 12 13 14 15 16 17
7	Any information copied from such Reports and S or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Massachusetts Republican State Conc	name and ad	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
∠ 4.	Full Name (Last, First, Middle Initial) JODY DOW	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,		Date of Receipt
••	Mailing Address 71 LEICESTER STREI	ET		04 29 2011
	City BROOKLINE	State MA	Zip Code 02445-5718	Transaction ID: SA11.185136 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer DR. ELIAS DOW	Occupation OFFICE	n MANAGER	CONTRIBUTION
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 1000.00	
- В.	Full Name (Last, First, Middle Initial) BARBARA EBERT			Date of Receipt
	Mailing Address 16 BREWSTER ROAD)		0 4
	City	State	Zip Code	Transaction ID: SA11.184851
	WAYLAND FEC ID number of contributing federal political committee.	C	01778-3704	Amount of Each Receipt this Period 250.00
	Name of Employer RETIRED	Occupation RETIRE		CONTRIBUTION
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 250.00	
-).	Full Name (Last, First, Middle Initial) DAVID ECKERT			Date of Receipt
	Mailing Address 48 MANSFIELD AVE			M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
	City NORTON	State MA	Zip Code 02766-2211	Transaction ID: SA11.185029 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C	02700 2211	500.00
	Name of Employer SELF EMPLOYED	Occupation INVEST	on OR AND CONSULTANT	CONTRIBUTION
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 1500.00	
	SUBTOTAL of Receipts This Page (optional)			1250.00
-	SUBTOTAL of Receipts This Page (optional) TOTAL This Period (last page this line number		<u> </u>	1250.00

	CHEDULE A (FEC Form 3X) FEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 9 / 34 (check only one) X
A 0	ny information copied from such Reports and S r for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Massachusetts Republican State Con	e name and add	dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
\angle	·	gressional C	ommittee	
١.	Full Name (Last, First, Middle Initial) CLAY EVANS			Date of Receipt
	Mailing Address PO BOX 792		7: 0 !	04 27 2011
	City NANTUCKET	State MA	Zip Code 02554-0792	Transaction ID: SA11.185106 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer STUDENT	Occupation STUDEN		CONTRIBUTION
	Receipt For: Primary General Other (specify) ▼		e Year-to-Date ▼ 1300.00	
	Full Name (Last, First, Middle Initial) JEROLD GNAZZO			Date of Receipt
	Mailing Address 169 COMMONWEAL	TH AVE		M M / D D / Y Y Y Y Y Y Y 2 0 1 1
	City	State	Zip Code	Transaction ID: SA11.185145
	BOSTON FEC ID number of contributing federal political committee.	C	02116-2221	Amount of Each Receipt this Period 300.00
	Name of Employer INFORMATION REQUESTED PER BEST EFFORTS		ATION REQUESTED PER I	CONTRIBUTION BEST EFFORTS
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 300.00	
_	Full Name (Last, First, Middle Initial) FRANK GRANARA Mailing Address 95 SHRINE RD.			Date of Receipt
	City	State	Zip Code	04 22 2011
	NORWELL	MA	02061-2235	Transaction ID: SA11.185048 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer GIC	Occupation PRESIDE		CONTRIBUTION
	Receipt For: Primary General Other (specify)		Year-to-Date ▼ 500.00	
	SUBTOTAL of Receipts This Page (optional) .	<u> </u>		1300.00

SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 10 / 34 (check only one) X
Any information copied from such Reports and or for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Massachusetts Republican State Con	e name and address of any political committe	erson for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) RICHARD HARDY Mailing Address 41 MCGREGORY RE City STURBRIDGE FEC ID number of contributing federal political committee. Name of Employer HYDE MANUFACTURING Receipt For: Primary General Other (specify)	State Zip Code MA 01566-1526 C Occupation CEO Aggregate Year-to-Date 500.00	Date of Receipt M M M O 6 2011 Transaction ID: SA11.184825 Amount of Each Receipt this Period 500.00 CONTRIBUTION
Full Name (Last, First, Middle Initial) JAMES HEARTY Mailing Address 27 SILVER HILL RD City WESTON FEC ID number of contributing federal political committee. Name of Employer CLOUGH CAPITAL Receipt For: Primary General Other (specify)	State Zip Code MA 02493-1330 C Occupation INVESTMENT MANAGEMENT Aggregate Year-to-Date 500.00	Date of Receipt M M D D Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) ARTHUR HILSINGER Mailing Address 8 JACKSON POND R City DEDHAM FEC ID number of contributing federal political committee. Name of Employer RETIRED Receipt For: Primary General Other (specify)	OAD State Zip Code MA 02026-5524 C Occupation RETIRED Aggregate Year-to-Date ▼	Date of Receipt M M / 26 / 2011 Transaction ID: SA11.185089 Amount of Each Receipt this Period 500.00 CONTRIBUTION
SUBTOTAL of Receipts This Page (optional) .		1500.00

	SCHEDULE A (FEC Form 3X) ITEMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 11 / 34 (check only one) X
	Any information copied from such Reports and S or for commercial purposes, other than using the	Statements ma e name and ad	y not be sold or used by any perso dress of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Massachusetts Republican State Con	gressional C	Committee	
Α.	Full Name (Last, First, Middle Initial) MICHAEL JAKE JACOBSON			Date of Receipt
	Mailing Address 16 HIGHLAND AVE.	Ctoto	7:n Codo	04 06 2011
	City CAMBRIDGE	State MA	Zip Code 02139-1016	Transaction ID: SA11.184829 Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		5000.00
	Name of Employer SELF EMPLOYED	Occupation REAL ES	on STATE DEVELOPER	CONTRIBUTION
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 5000.00	
Б.	Full Name (Last, First, Middle Initial) STEPHEN JEFFRIES Meiling Address 10 DRIMMED CT	<u> </u>		Date of Receipt
	Mailing Address 12 BRIMMER ST.			04 01 2011
	City	State	Zip Code	Transaction ID: SA11.184812
	BOSTON	MA	02108-1002	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		277.78 CONTRIBUTION
	Name of Employer S.B. JEFFRIES CONSULTANTS	Occupation PRESID		CONTRIBOTION
	Receipt For: Primary General Other (specify) ▼	Aggregate	e Year-to-Date ▼ 277.78	
- C.	Full Name (Last, First, Middle Initial) JEANNE KANGAS			Date of Receipt
-	Mailing Address 959 HILL RD			0 4 1 9 2 0 1 1
	City	State	Zip Code	Transaction ID: SA11.184949
	BOXBOROUGH FEC ID number of contributing federal political committee.	C	01719-1012	Amount of Each Receipt this Period 500.00
	Name of Employer ARNOLD & KANGAS, P.C.	Occupatio		CONTRIBUTION
	Receipt For: ☐ Primary ☐ General ☐ Other (specify) ▼	Aggregate	e Year-to-Date ▼ 5750.00	
	SUBTOTAL of Receipts This Page (optional)			5777.78
	TOTAL This Period (last page this line number		<u> </u>	

SCHEDULE A (FEC Form 3X)

	CHEDULE A (FEC Form 3X) EMIZED RECEIPTS		Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 12 / 34 (check only one) X 11a 11b 11c 12 13 14 15 16 1
A 0	ny information copied from such Reports and for commercial purposes, other than using the	Statements may i e name and addr	not be sold or used by any persess of any political committee to	on for the purpose of soliciting contributions o solicit contributions from such committee.
	NAME OF COMMITTEE (In Full) Massachusetts Republican State Con	gressional Co	mmittee	
	Full Name (Last, First, Middle Initial) RONALD KAUFMAN			Date of Receipt
	Mailing Address 401 SIXTH STREET,	SE		04 29 2011
	City	State	Zip Code	Transaction ID: SA11.185147
	WASHINGTON	DC	20003-2704	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer THE DUTKO GROUP	Occupation CONSULT	TANT	CONTRIBUTION
	Receipt For:		Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
	Full Name (Last, First, Middle Initial) JAMES KEATING			Date of Receipt
	Mailing Address 20 TEELE RD.			M M / D D / Y Y Y Y Y Y Y Y Y 1 1 9 2 0 1 1
	City	State	Zip Code	Transaction ID: SA11.184860
	BOLTON	MA	01740-1118	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer THE KEATING GROUP, INC.	Occupation BUSINES	S OWNER	CONTRIBUTION
	Receipt For:	Aggregate \	Year-to-Date ▼	
	Primary General Other (specify) ▼		500.00	
_	Full Name (Last, First, Middle Initial) THOMAS KERSHAW			Date of Receipt
	Mailing Address 84 BEACON ST.			0 4 2 8 2 0 1 1
	City	State	Zip Code	Transaction ID: SA11.185111
	BOSTON	MA	02108-3421	Amount of Each Receipt this Period
	FEC ID number of contributing federal political committee.	C		500.00
	Name of Employer HAMPSHIRE HOUSE RESTAURANT	Occupation OWNER		CONTRIBUTION
	Receipt For:	Aggregate \	Year-to-Date ▼	_
	Primary General Other (specify) ▼	0 0	500.00	
Г		1		1500.00

SCHEDULE A (FEC Form 3X)

SCHEDULE A (FEC Form 3X) TEMIZED RECEIPTS	Use separate schedule(s) for each category of the Detailed Summary Page	FOR LINE NUMBER: PAGE 13 / 34 (check only one) X 11a 11b 11c 12 13 14 15 16
Any information copied from such Reports and sor for commercial purposes, other than using the NAME OF COMMITTEE (In Full) Massachusetts Republican State Con	e name and address of any political committee t	on for the purpose of soliciting contributions
Full Name (Last, First, Middle Initial) BARBARA KRONCKE Mailing Address 51 BAKER PLACE City NEWTON FEC ID number of contributing federal political committee. Name of Employer MCCARTER AND ENGLISH Receipt For: Primary General Other (specify)	State Zip Code MA 02462-1303 C Occupation ATTORNEY Aggregate Year-to-Date 500.00	Date of Receipt M M M / 29 / 2011 Transaction ID: SA11.185130 Amount of Each Receipt this Period 500.00 CONTRIBUTION
Full Name (Last, First, Middle Initial) DREW LEFF Mailing Address 112 BEACH ST. City BOSTON FEC ID number of contributing federal political committee. Name of Employer GLC DEVELOPMENT RESOURCES Receipt For: Primary General Other (specify)	State Zip Code MA 02111-2541 C Occupation REAL ESTATE CONSULT. Aggregate Year-to-Date 300.00	Date of Receipt M M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Full Name (Last, First, Middle Initial) BRAD MARSTON Mailing Address 90 BEACON STREET #2 City BOSTON FEC ID number of contributing federal political committee. Name of Employer RETIRED Receipt For: Primary General Other (specify)	State Zip Code MA 02108-3311 C Occupation RETIRED Aggregate Year-to-Date 285.00	Date of Receipt M M M / D D / Y Y Y Y Y O 4 2 9 2 0 1 1 Transaction ID: SA11.185134 Amount of Each Receipt this Period 50.00 CONTRIBUTION
SUBTOTAL of Receipts This Page (optional) .		700.00

В.

PAGE 14/34 FOR LINE NUMBER: SCHEDULE A (FEC Form 3X) Use separate schedule(s) (check only one) for each category of the **ITEMIZED RECEIPTS** 11a 11b 11c **Detailed Summary Page** 13 14 16 17 Any information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee. NAME OF COMMITTEE (In Full) Massachusetts Republican State Congressional Committee Full Name (Last, First, Middle Initial) PATRICIA PETROU Date of Receipt Mailing Address 82 MARMION WAY 0.4 20 2011 City State Zip Code Transaction ID: SA11.185004 **ROCKPORT** MA 01966-1926 Amount of Each Receipt this Period FEC ID number of contributing 500.00 C federal political committee. CONTRIBUTION Name of Employer RETIRED Occupation **RETIRED** Receipt For: Aggregate Year-to-Date General Primary 500.00 Other (specify) Full Name (Last, First, Middle Initial) JOHN SIVOLELLA Date of Receipt Mailing Address 85 MONADNOCK RD. 0.4 29 2011 City State Zip Code Transaction ID: SA11.185140 **WELLESLEY** MA 02481-1335 Amount of Each Receipt this Period FEC ID number of contributing C 500.00 federal political committee. CONTRIBUTION Name of Employer COLUMBIA UNIVERSITY Occupation **ACADEMIC** Receipt For: Aggregate Year-to-Date ▼

SUBTOTAL of Receipts This Page (optional)	•	1000.00
TOTAL This Period (last page this line number only)		14977.78

500.00

Primary

Other (specify)

General

SCHEDULE A (FEC Form 3) ITEMIZED RECEIPTS	ose separate serieddie(s)						
Any information copied from such Reports a or for commercial purposes, other than using							
NAME OF COMMITTEE (In Full) Massachusetts Republican State C	Congressional Com	nmittee					
Full Name (Last, First, Middle Initial) FLEITMAN FOR CONGRES Mailing Address P.O. BOX 60067			Date of Receipt M M / D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
City	State	Zip Code	Transaction ID: SA11.185124				
NORTHAMPTON	MA	01062-0067	Amount of Each Receipt this Period				
FEC ID number of contributing federal political committee.	C		100.00				
Name of Employer	Occupation		CONTRIBUTION				
Receipt For: Primary General Other (specify) ▼	Aggregate Ye	ear-to-Date ▼ 100.00					

		100.00
SUBTOTAL of Receipts This Page (optional)		
TOTAL This Period (last page this line number only)	•	100.00

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)								NE NUMBER: PAGE 16 / 34 only one)											
ITEMIZED DISBURSEMENTS		category of the Summary Page		Š	_	21b			23 28b	F	24 28c		25 29	\mathbf{H}	26 30b					
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name														3						
NAME OF COMMITTEE (In Full) Massachusetts Republican State Congress	ional Con	nmittee																		
Full Name (Last, First, Middle Initial) JODY BLAIS							Date o			en			12 10 1 1	Y						
Mailing Address 1420 COUNTY STREET							0 4						U I							
,	State MA	Zip Code 02703				Amount of Each Disbursement this Period														
Purpose of Disbursement TRAVEL REIMBURSEMENT				•			L.	_				_	95.00)						
Candidate Name					egory/ vpe															
Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (spe	General cify) ▼																		
Full Name (Last, First, Middle Initial) TIMOTHY BUCKLEY							Date o		sburs	en				V						
Mailing Address 55 W BROADWAY #8							0 4		1	2		2	0 1 1							
,	State MA	Zip Code 02127					Amou	nt o	f Each	ı C	isburse	emer	t this f	Period						
Purpose of Disbursement SEPTEMBER STIPEND							L.					.2	30.59)						
Candidate Name					egory/															
Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (spe	General cify) ▼			•															
Full Name (Last, First, Middle Initial)							Trans	acti	on ID:	:	SB21	B.03	34							
TIMOTHY BUCKLEY								of D				Υ''	,	Υ						
Mailing Address 55 W BROADWAY #8							0 4		1	1 3	3	2	0 1 1							
	State MA	Zip Code 02127					Amou	nt o	f Each	ı C	isburse	emer	t this I	Period	1					
Purpose of Disbursement PAYROLL				·								10	83.01							
Candidate Name					egory/ /pe															
Office Sought: House Disburse Senate President	ment For: Primary Other (spe	General			<u>-</u>															
State: District:		· · ·																		
SUBTOTAL of Disbursements This Page (optional) .					<u> </u>							14	08.60							

SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		NUMBER:	PAGE 17/34
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check on X 21b 27	22 23 28a 28b	24 25 26 28c 29 30
ny Information copied from such Reports and Staten r for commercial purposes, other than using the name			for the purpose of s	oliciting contributions
NAME OF COMMITTEE (In Full) Massachusetts Republican State Congress	sional Committee			
Full Name (Last, First, Middle Initial) TIMOTHY BUCKLEY			Transaction ID: Date of Disburse	ement
Mailing Address 55 W BROADWAY #8			0 4 M / D	28 7 2011
City SOUTH BOSTON	State Zip Code MA 02127		Amount of Each	Disbursement this Period
Purpose of Disbursement PAYROLL Candidate Name		Data manuf		1083.01
	ment For:	Category/ Type		
Senate President State: District:	Primary General Other (specify) ▼			
Full Name (Last, First, Middle Initial) AMANDA CODY			Transaction ID:	
Mailing Address 73 ABBOTT AVENUE			0 4 D	^D 2 0 1 1
City EVERETT	State Zip Code MA 02149		Amount of Each	Disbursement this Period
Purpose of Disbursement REIMBURSEMENT				91.61
Candidate Name		Category/ Type	_	
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)			
Full Name (Last, First, Middle Initial) AMANDA CODY			Transaction ID: Date of Disburse	
Mailing Address 73 ABBOTT AVENUE			0 4 M / D	^D 2011
City EVERETT	State Zip Code MA 02149		Amount of Each	Disbursement this Period
Purpose of Disbursement PAYROLL				916.66
Candidate Name		Category/ Type	_	
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify) ▼			
SUBTOTAL of Disbursements This Page (optional)		>		2091.28
TOTAL This Period (last page this line number only)		•		le B (Form 3X) (Revised 0

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SCHEDULE B (FEC Form 3X)	Use separate scriedule(s) (cho							LINE NUMBER: PAGE 18 / 34 conly one)										
ITEMIZED DISBURSEMENTS	for each category of Detailed Summary		X	_		22 28a	P 25	3 [8b	24 28c		25 29	26 30b						
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name				/ person		the pu	rpose	of so	liciting co		outions							
NAME OF COMMITTEE (In Full)																		
Massachusetts Republican State Congress	ional Committee																	
Full Name (Last, First, Middle Initial) AMANDA CODY						Date	of Disb	urse										
Mailing Address 73 ABBOTT AVENUE					04													
•	State Zip Code MA 02149	Э.				Amou	int of E	ach	Disburse	-								
Purpose of Disbursement REIMBURSEMENT		lг	0	-						2	00.00)						
Candidate Name		C	Cate Ty	gory/ pe														
Office Sought: House Disburse Senate President State: District:	ment For: Primary Ge Other (specify)	neral																
Full Name (Last, First, Middle Initial)						Trane	action	י ווי	SB21I	3 05	:n							
AMANDA CODY							of Disb		_	٥.0٠	,0							
Mailing Address 73 ABBOTT AVENUE						0 ^M 4	M /	^D 2	7 /	Ž	0 1 1	Y						
,	State Zip Code MA 02149	9				Amou	int of E	ach	Disburse									
Purpose of Disbursement PAYROLL							•			.9	16.65							
Candidate Name		C	Cate Ty	gory/ pe														
Senate President	ment For: Primary Ge Other (specify) ▼	eneral																
State: District:																		
Full Name (Last, First, Middle Initial) ANTONY FERRUCCI						Date	action of Disb	urse	D / N			V						
Mailing Address 62 DWIGHT STREET, A	PT 1					0 4	, , , , , , , , , , , , , , , , , , ,	1	3 /	2	0 1 1							
	State Zip Code MA 02446	Э				Amou	int of E	ach	Disburse	-		-						
Purpose of Disbursement PAYROLL						<u></u>				9	16.77							
Candidate Name			Cate Ty	gory/ pe														
Senate President	ment For: Primary Ge Other (specify)	neral																
State: District:																		
SUBTOTAL of Disbursements This Page (optional)				<u> </u>						20	33.42							

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SCHEDULE B (FEC Form 3X)			INE NUMBER: PAGE 19 / 34 only one)											
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	ch category of the				24 28c	25 29	26 30b						
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name														
NAME OF COMMITTEE (In Full) Massachusetts Republican State Congress	sional Committee													
Full Name (Last, First, Middle Initial) ANTONY FERRUCCI Mailing Address 62 DWIGHT STREET, A	PT 1			Date	saction ID of Disburs	_	B.040 ′ ž 0 ĭ	1 Y						
,	State Zip Code MA 02446			Amount of Each Disbursement this Period										
Purpose of Disbursement TRAVEL REIMBURSEMENT Candidate Name	egory/	Ī L.			335.2	20								
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)	-	ype											
Full Name (Last, First, Middle Initial) ANTONY FERRUCCI Mailing Address 62 DWIGHT STREET, A		Date	saction ID of Disburs	_	B.051 ´ ž 0 ĭ	1 Y								
,	State Zip Code MA 02446			Amou	int of Each	n Disburse	ement this	s Period						
Purpose of Disbursement PAYROLL	02110						916.7	77						
Office Sought: House Disburse Senate President	ement For: Primary General Other (specify)	Т	egory/ ype											
State: District: Full Name (Last, First, Middle Initial) KAITLYN GREELEY					saction ID		B.005							
Mailing Address 34 FRESNO STREET					M / D	0 1	źoi	1						
RÓSINDALE	State Zip Code MA 02131			Amou	int of Each	n Disburse								
Purpose of Disbursement PAYROLL Candidate Name			egory/				568.9	99						
Senate President	ement For: Primary General Other (specify)	-	ype											
State: District:					•									
SUBTOTAL of Disbursements This Page (optional) .	<u></u>		▶				1820.9	96						

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE (check only	
TEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name			
NAME OF COMMITTEE (In Full)	o and address of any pointed		
Massachusetts Republican State Congress	sional Committee		
Full Name (Last, First, Middle Initial) NATHAN LITTLE			Transaction ID: SB21B.033
NATHAN LITTLE			Date of Disbursement
Mailing Address 83 CONGREVE			$\begin{bmatrix} \begin{smallmatrix} M & 4 & M \\ 0 & 4 & M \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & 1 & 3 \\ 2 & 1 & 1 & 4 \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 1 & 4 \end{bmatrix} \ $
City W ROXBURY	State Zip Code MA 02132		Amount of Each Disbursement this Period
Purpose of Disbursement	WA 02132	0 0	2176.58
PAYROLL Condidate News			
Candidate Name		Category/ Type	
	ement For:		
Senate President	Primary General Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) MELISSA LUCAS			Transaction ID: SB21B.054
WELISSA LUCAS			Date of Disbursement O 4 D D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address 22 SLAYTON RD.			$\begin{bmatrix} 0.4 & M \\ 0.4 & M \end{bmatrix} / \begin{bmatrix} 0.2 & 0 \\ 2.8 & 0 \end{bmatrix} / \begin{bmatrix} 0.2 & 0.2 & 0.2 \\ 0.2 & 0.2 & 0.2 \end{bmatrix}$
City MELROSE	State Zip Code MA 02176		Amount of Each Disbursement this Period
Purpose of Disbursement	IVIA 02176		2638.00
STRATEGY CONSULTING			
Candidate Name		Category/ Type	
Office Sought: House Disburse	ement For: Primary General		
President	Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) JENNIFER NASSOUR			Transaction ID: SB21B.012 Date of Disbursement
Mailing Address 49 CHELSEA STREET			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & A \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ O & D \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & O & 1 & 1 \end{smallmatrix} \end{bmatrix}$
City CHARLESTOWN	State Zip Code		Amount of Each Disbursement this Period
Purpose of Disbursement	MA 02129		245.00
TRAVEL REIMBURSEMENT			
Candidate Name		Category/ Type	
	ement For:	71 -	
Senate President	Primary General Other (specify)		
State: District:			
SUBTOTAL of Disbursements This Page (optional)			5059.58
Optional)		······	3,33,33

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SCHEDULE B (FEC Form 3X)		FOR LINE	NE NUMBER: PAGE 21 / 34								
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)								
	Detailed Summary Page	X 21b 27	22 23 2 28a 28b 2	4 25 26 8c 29 30b							
Any Information copied from such Reports and Statem											
or for commercial purposes, other than using the name NAME OF COMMITTEE (In Full)	e and address of any political	committee to sol	icit contributions from suc	ch committee							
Massachusetts Republican State Congress	sional Committee										
Full Name (Last, First, Middle Initial) ADVANTAGE PAYROLL SERVICES			Transaction ID: SB2 Date of Disbursement	21B.001							
Mailing Address P.O. BOX 1330			04 01	^Y 2011							
City AUBURN	State Zip Code ME 04211		Amount of Each Disbu								
Purpose of Disbursement PAYROLL SERVICE FEE				206.73							
Candidate Name		Category/ Type									
Senate President	ement For: Primary General Other (specify)										
State: District: Full Name (Last, First, Middle Initial)											
ADVANTAGE PAYROLL SERVICES			Transaction ID: SB2 Date of Disbursement								
Mailing Address P.O. BOX 1330			04 12	Y ŽOŽII							
City AUBURN	State Zip Code ME 04211		Amount of Each Disbu	rsement this Period							
Purpose of Disbursement PAYROLL TAX				2970.67							
Candidate Name		Category/ Type									
Senate President	ement For: Primary General Other (specify)										
State: District:											
Full Name (Last, First, Middle Initial) ADVANTAGE PAYROLL SERVICES			Transaction ID: SB2 Date of Disbursement								
Mailing Address P.O. BOX 1330			04	y žožii							
AÚBURN	State Zip Code ME 04211		Amount of Each Disbu								
Purpose of Disbursement PAYROLL TAX Condidate Name				2053.90							
Candidate Name		Category/ Type									
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)										
State: District:											
SUBTOTAL of Disbursements This Page (optional)		>		5231.30							

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ITEMIZED DISBURSEMENTS		category of the Summary Page		_	21b 27	F	22 28a	П	23 28b	22	L		25 29	П	26 30b			
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name																		
NAME OF COMMITTEE (In Full) Massachusetts Republican State Congress	sional Con	nmittee																
Full Name (Last, First, Middle Initial) ADVANTAGE PAYROLL SERVICES							Date o		on ID:		21B.		8 0 1 1	Y				
Mailing Address P.O. BOX 1330							0 4		2	6		2	011					
,	State ME	Zip Code 04211				Amount of Each Disbursement this Period												
Purpose of Disbursement PAYROLL SERVICE FEE			Г	0	•		L.	_				5	55.36	-				
Candidate Name					egory/ /pe													
Office Sought: House Disburse Senate President State: District:	ment For: Primary Other (spe	General ecify) ▼																
Full Name (Last, First, Middle Initial) ADVANTAGE PAYROLL SERVICES								of D	sburse	ement	21B.							
Mailing Address P.O. BOX 1330							0 ^M 4	М	^D 2	7	Y	ž	0 1 1	Y				
,	State ME	Zip Code 04211					Amou	nt o	f Each	Disbu	sem	ent	this F	erio	b			
Purpose of Disbursement PAYROLL TAX				0	•		L.					206	60.80					
Candidate Name					egory/ /pe													
Senate President	ment For: Primary Other (spe	General ccify) ▼																
State: District: Full Name (Last, First, Middle Initial)							Trans	acti	on ID:	SB2	21B.	01	6					
AMERICAN EXPRESS							М	of Di	sburse 0		Υ	Y	0 1 1	Υ				
Mailing Address P.O. BOX 1270							0 4	_	0	5		2	011					
	State NJ	Zip Code 07101					Amou	nt o	f Each	Disbu	sem		-	-	b			
Purpose of Disbursement BANK FEE				v	•		L.					3	38.30					
Candidate Name					egory/ /pe													
Office Sought: House Disburse Senate President	ment For: Primary Other (spe	General		_														
State: District:	Outer (Spe																	
SUBTOTAL of Disbursements This Page (optional) .		·····	<u></u>		. •				·		2	15	4.46					

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SCHEDULE B (FEC Form 3X)	FOR LINE	INE NUMBER: PAGE 23/34								
ITEMIZED DISBURSEMENTS	Use separate schedule(s) for each category of the	(check only	one)							
	Detailed Summary Page	X 21b 27	22 23 28b 28b	24 25 26 28c 29 30b						
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name										
NAME OF COMMITTEE (In Full) Massachusetts Republican State Congress	sional Committee									
Full Name (Last, First, Middle Initial)			Transaction ID: S	2P21P 006						
AUTHORIZE.NET			Date of Disburseme	ent						
Mailing Address P.O. BOX 8999			0 4 0 4	['] 20111						
•	State Zip Code CA 94128		Amount of Each Dis	bursement this Period						
Purpose of Disbursement CREDIT CARD FEES				15.20						
Candidate Name		Category/ Type								
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	71								
State: District:										
Full Name (Last, First, Middle Initial) AUTHORIZE.NET			Transaction ID: S Date of Disburseme							
Mailing Address P.O. BOX 8999			$\begin{bmatrix} 0 & 4 & M \\ 0 & 4 & M \end{bmatrix}$	2011						
•	State Zip Code CA 94128		Amount of Each Dis	bursement this Period						
Purpose of Disbursement CREDIT CARD FEES				20.00						
Candidate Name		Category/ Type								
Senate President	ment For: Primary General Other (specify) ▼									
State: District: Full Name (Last, First, Middle Initial)				NDO4D 000						
BANK OF AMERICA\FLEET BANK			Transaction ID: S Date of Disburseme	ent						
Mailing Address PO BOX 25118			04 01	2011						
	State Zip Code FL 33622		Amount of Each Dis	sbursement this Period						
Purpose of Disbursement CREDIT CARD FEES				74.99						
Candidate Name		Category/ Type								
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)	7.								
State: District:	•									
SUBTOTAL of Disbursements This Page (optional) .				110.19						

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)	FOR LINE	
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	(check only 21b 27	22 23 24 25 26 28a 28b 28c 29 30b
Any Information copied from such Reports and Staten or for commercial purposes, other than using the nam		d by any person fo	or the purpose of soliciting contributions
NAME OF COMMITTEE (In Full) Massachusetts Republican State Congress	sional Committee		
Full Name (Last, First, Middle Initial) BANK OF AMERICA\FLEET BANK			Transaction ID: SB21B.003 Date of Disbursement
Mailing Address PO BOX 25118			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 4 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ O & 1 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 1 \end{smallmatrix} \end{bmatrix}$
City TAMPA	State Zip Code FL 33622		Amount of Each Disbursement this Period
Purpose of Disbursement CREDIT CARD FEES			25.00
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President State: District:	ement For: Primary General Other (specify)		
Full Name (Last, First, Middle Initial) BARROWS INSURANCE AGENCY			Transaction ID: SB21B.036 Date of Disbursement
Mailing Address 215 NORTH MAIN STRE	ET		$\begin{bmatrix} \begin{smallmatrix} M & 4 & M \\ 0 & 4 & M \end{smallmatrix} \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} D & 1 & 0 \\ 1 & 9 \end{bmatrix} \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & 0 & 1 & 1 \end{smallmatrix} \end{bmatrix} $
City MANSFIELD	State Zip Code MA 02048		Amount of Each Disbursement this Period
Purpose of Disbursement INSURANCE PAYMENT			2005.12
Candidate Name		Category/ Type	
Office Sought: House Disburse Senate President	ement For: Primary Other (specify)		
State: District:			
Full Name (Last, First, Middle Initial) BFSDANIELS			Transaction ID: SB21B.010 Date of Disbursement
Mailing Address 12 CHANNEL STREET			$\begin{bmatrix} \begin{smallmatrix} M & M \\ O & 4 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} D & D \\ O & 5 \end{smallmatrix} \end{bmatrix} \ / \ \begin{bmatrix} \begin{smallmatrix} Y & Y & Y & Y \\ 2 & O & 1 & 1 \end{smallmatrix} \end{bmatrix}$
City BOSTON	State Zip Code MA 02210		Amount of Each Disbursement this Period
Purpose of Disbursement PRINTING			223.13
Candidate Name		Category/ Type	
Senate President	ement For: Primary General Other (specify)		
State: District:			
SURTOTAL of Dishursements This Page (ontional)			2253.25

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SCHEDULE B (FEC Form 3X)	Use separate schedule(s)		FOR LIN		E NUMBER: PAGE 25 / 34 ly one)								
ITEMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	1-	21b 27	$\bigcap_{i=1}^{n} 2^{i}$	22 [28a [_	23 28b	24 28c		25 29	26 30b		
Any Information copied from such Reports and Statem or for commercial purposes, other than using the name				n for th	ne pur	pose	of so	oliciting co					
NAME OF COMMITTEE (In Full) Massachusetts Republican State Congress	ional Committee												
Full Name (Last, First, Middle Initial) BFSDANIELS				D	ransa Date of	f Disl	burse	SB21E		14 0 1	1 Y		
Mailing Address 12 CHANNEL STREET City	State Zip Code												
	MA 02210			Amount of Each Disbursement this Period									
Purpose of Disbursement PRINTING									12	05.94	!		
Candidate Name			egory/ ype										
Office Sought: House Disburse Senate President State: District:	ment For: Primary General Other (specify)												
Full Name (Last, First, Middle Initial) BOWDITCH & DEWEY					ate of	f Disl	burse			-	V		
Mailing Address 310 MAIN STREET PO E	3OX 15156				0 4	<u>'</u>	^D 0	^D / Y	Ž	0 1 ·	1 1		
,	State Zip Code MA 01615			A	moun	nt of E	Each	Disburse	men	t this	Period		
Purpose of Disbursement STRATEGY CONSULTING				7 L					60	32.4	5		
Candidate Name			egory/ ype										
Senate President	ment For: Primary General Other (specify) ▼												
State: District: Full Name (Last, First, Middle Initial)				Т	ransa	ectio	n ID:	SB21E	3 0.3	85			
BOWDITCH & DEWEY					ate of	f Disl	burse	ement			V		
Mailing Address 310 MAIN STREET PO E	3OX 15156				0 4		1	5 / _ '	2	0 1	1		
,	State Zip Code MA 01615			A	moun	nt of E	Each	Disburse	men	t this	Period		
Purpose of Disbursement STRATEGY CONSULTING			-						33	87.00)		
Candidate Name			egory/ ype										
Office Sought: House Disburse Senate President	ment For: Primary General Other (specify)		71										
State: District:	(-F)/ V												
SUBTOTAL of Disbursements This Page (optional) .			>					1	062	25.39	9		

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SCHEDULE B (FEC Form 3)	Use separate stricture(s) /- -							LINE NUMBER: PAGE 26 / 34 k only one)											
ITEMIZED DISBURSEMENT	for each category Detailed Sumn			21b 27	П	22 28a		23 28b	24 28c		25 29	26 30b							
Any Information copied from such Reports ar or for commercial purposes, other than using				ny persor		the pu		e of s	oliciting co		outions								
NAME OF COMMITTEE (In Full)																			
Massachusetts Republican State C	ongressional Committ	ee																	
Full Name (Last, First, Middle Initial) BYTEBULB						Trans Date o			SB21E	3.04	! 5								
Mailing Address PO BOX 2216						0 ^M 4	М	^D 2	2 5 / Y	Ž	0 1 1	Y							
City HANOVER		Code 339				Amou	nt of	Each	Disburse	men	t this f	Period							
Purpose of Disbursement WEB SERVICE			,							1	00.00								
Candidate Name		C		egory/ ype															
Office Sought: Senate President State: District:	Disbursement For: Primary Other (specify)	General ▼																	
Full Name (Last, First, Middle Initial)									SB21	3.00)4								
ELAVON						Date o	of Di	/ D	D / Y	′ Y	0 1 1	Υ							
Mailing Address ONE CONCOUR	SE PARKWAY, SUITE	300				0 4		0	1	. 2	011								
City ATLANTA		Code 328				Amou	nt of	Each	Disburse										
Purpose of Disbursement CREDIT CARD FEES										0	86.91								
Candidate Name		C		egory/ ype															
Office Sought: Senate President State: District:	Disbursement For: Primary Other (specify)	General ▼																	
Full Name (Last, First, Middle Initial)						_			0001										
FEDEX						Date o		sburse				V							
Mailing Address P.O. BOX 37146	1					0 4	IMI /	0	5 /	2	0 1 1	Ť							
City PITTSBURGH		Code 250				Amou	nt of	Each	Disburse	men	t this f	Period							
Purpose of Disbursement SHIPPING				i							14.45	5							
Candidate Name				egory/ ype															
Office Sought: House Senate President	Disbursement For: Primary Other (specify)	General																	
State: District:																			
SUBTOTAL of Disbursements This Page (o	optional)			•						20	01.36								

	CHEDULE B (FEC FOIII 3X)	Use separate schedule(s	(check or	E NUMBER: PAGE 27 / 34
	EMIZED DISBURSEMENTS	for each category of the Detailed Summary Page	X 21b 27	22 23 24 25 28a 28b 28c 29
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\rangle	NAME OF COMMITTEE (In Full) Massachusetts Republican State Congres	ssional Committee		
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	Mailing Address P.O. BOX 371461			04 12 2011
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	Candidate Name		Category/ Type	
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SCHEDULE B (FEC Form 3X)

Senate

District:

President

FOR LINE NUMBER: PAGE 34/34 Use separate schedule(s) (check only one) ITEMIZED DISBURSEMENTS for each category of the 21b 22 23 25 26 **Detailed Summary Page** 27 28a 28b 28c 29 30b Any Information copied from such Reports and Statements may not be sold or used by any person for the purpose of soliciting contributions or for commercial purposes, other than using the name and address of any political committee to solicit contributions from such committee NAME OF COMMITTEE (In Full) Massachusetts Republican State Congressional Committee Full Name (Last, First, Middle Initial) Transaction ID: SB21B.046 US POST OFFICE Date of Disbursement 25 0 4 2011 Mailing Address JFK STATION City State Zip Code Amount of Each Disbursement this Period **BOSTON** MA 02114 14.30 Purpose of Disbursement **POSTAGE** Candidate Name Category/ Type Office Sought: Disbursement For: House General Senate Primary President Other (specify) State: District: Full Name (Last, First, Middle Initial) Transaction ID: SB21B.015 **VERIZON PHONE** Date of Disbursement 0 5 0 4 2011 Mailing Address PO BOX 1100 City State Zip Code Amount of Each Disbursement this Period **ALBANY** 12250 NY 655.67 Purpose of Disbursement PHONE SERVICE Candidate Name Category/ Type Office Sought: House Disbursement For:

General

SUBTOTAL of Disbursements This Page (optional)	•	669.97
TOTAL This Period (last page this line number only)	•	48392.29

Primary

Other (specify)

State: